



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION



SEC USE ONLY									
Prefix		Seria							
DAT	VED								

Name of Offering ([] check if this is an amendment and na	ame	has c	han	ged,	and	indi	cate change.)	
MOUNTAIN POWER INC.							•	
Private Placement of 840,000 Units at CDN\$0.40 (US\$0.	.35 ⁽¹) Pe i	<u>r Un</u>	it				
Filing Under (Check box(es) that apply): [] Rule 504 [] Ru	ile 50	5 [X] <u>F</u>	tule	506	[] Section 4(6)	[] ULOE
Type of Filing: [X] New Filing [] Amendment								
A. BASIC IDEN	TIF	ICA	TIO	N D	ATA	1		
1. Enter the information requested about the issuer								
Name of Issuer ([] check if this is an amendment and nam	e ha	is cha	inge	l, an	d in	dica	te change.)	
MOUNTAIN POWER INC.	,							
Address of Executive Offices (Number and Street, City, State, Zi	ip Co	ode)			Γ	elep	hone Number (Includ	ling Area Code)
Suite 101A, 1546 Derwent Way, Delta, British Columbia						604	525-4114	
Address of Principal Business Operations (Number and Street, Ci	ty, S	tate, Z	Zip C	ode)	Γ	elep	hone Number (Includ	ling Area Code)
(if different from Executive Offices)								
(same)					(;	sam	e)	DDACECE
Brief Description of Business								LUAPPOPT &
Development of Battery Power Packs								1 5 6006
Type of Business Organization								AUG 1 5 2006
[X] corporation [] limited partnership, also						[]c	ther (please specify):	
[] business trust [] limited partnership, to	be f	orme	<u> 1</u>					THOMSON
	Mo	onth		Ye	ear			FINANCIAL
Actual or Estimated Date of Incorporation or Organization:	0	7	1	9	9	7	[x] Actual	[] Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U	.S. F	Postal	Serv	ice a	bbre	viati	on [CN] (British	Columbia)
for State: CN for Canada; FN for other foreign jurisdiction							[CN] (British	(Columbia)
GENERAL INSTRUCTIONS								
Federal:								
Who Must File: All issuers making an offering of securities in r	eliar	nce or	n an	exem	iptioi	n un	der Regulation D or	Section 4(6), 17 CFR
230.501 et seq. or 15 U.S.C. 77d(6).		~	1	c			.1 66 1 4 .1	
When to File: A notice must be filed no later than 15 days after								
the U.S. Securities and Exchange Commission (SEC) on the earlier received at that address after the date on which it is due on the							•	•
received at that address after the date on which it is due, on the address.	uate	e it Wa	as m	anea	оу с	Jnite	a States registered of	certified mail to that
address.								

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Based on an exchange rate of CDN\$1.00 per US\$0.89 as at July 28, 2006



Potential persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number. A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: [] Promoter [] Beneficial Owner [x] Executive Officer [x] Director [] General/Managing Partner Full Name (Last name first, if individual) Steven Andersen Business or Residence Address (Number and Street, City, State, Zip Code) Suite 101A, 1546 Derwent Way, Delta, British Columbia, V3M 6M4 Check Box(es) that Apply: [] Promoter [] Beneficial Owner [x] Executive Officer [x] Director [] General/Managing Partner Full Name (Last name first, if individual) Richard Hopp Business or Residence Address (Number and Street, City, State, Zip Code) Suite 101A, 1546 Derwent Way, Delta, British Columbia, V3M 6M4 Check Box(es) that Apply: [] Promoter [] Beneficial Owner [x] Executive Officer [x] Director [] General/Managing Partner Full Name (Last name first, if individual) Hank Petranik Business or Residence Address (Number and Street, City, State, Zip Code) Suite 101A, 1546 Derwent Way, Delta, British Columbia, V3M 6M4 Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General/Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General/Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General/Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General/Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General/Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet as necessary)

					ORMATI							
1. Has the	e issuer sol	d, or does	the issuer i	ntend to se						under III OE	Yes	No
2. What is	s the minin	num invest	ment that v	vill be acce						under ULOE		[X] VA.
					-	-					Yes	No
Does th	ne offering	permit joi	nt ownersh	ip of a sing	le unit?			······································	11 .1		[_]	[X]
										indirectly, a		
										ne name of the		
			to be listed	d are assoc	iated perso	ns of such	a broker o	or dealer, y	ou may se	t forth the in	nformation	n for tha
	dealer only		individual)				·					
			CORPO		1							
					City, State	, Zip Code) .					
				uver, Bri	tish Colui	nbia, V7	Y 1H2					
	Associated			DATION	l (USA), I	NC						
							ers (Check '	"All States"	or check	individual S	ates) ~ Al	1 States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
			individual)							<u> </u>	[· · -]	[]
		,										
Business	or Residen	ce Addres	s (Number	and Street,	City, State	, Zip Code)					
Name of	Associated	Broker or	Dealer			•						
States in	Which Per	son Listed	Has Solici	ted or Inter	nds to Solic	it Purchase	ers (Check	"All States	or check	individual S	tates) ~ Al	1 States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Nam	e (Last nar	ne first, if	individual)									
Business	or Residen	ce Addres	s (Number	and Street,	City, State	, Zip Code)			· ···		
Name of	Associated	Broker or	Dealer		······································		· · · · · · · · · · · · · · · · · · ·				-	
States in	Which Per	son Listed	Has Solici	ted or Inter	nds to Solic	it Purchase	ers (Check	"All States	or check	individual S	tates) ~ Al	1 States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Nam	e (Last nai	ne first, if	individual)	 								
Business	or Resider	nce Addres	s (Number	and Street	, City, State	e, Zip Code	:)					
Name of	Associated	Broker or	Dealer			····						
							=			individual S	tates) ~ Al	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
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[IL]	L J											
[IL] [MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	total amount already sold. Enter "0" if answer is "none" or "zero." If the			
	transaction is an exchange offering, check this box [] and indicate in the			
	columns below the amounts of the securities offered for exchange and already			
	exchanged.	Aggregate		Amount
	Type of Security	Offering Price	-	Already Sold
	Debt	_\$0	_	\$0
	Equity	\$0	_	\$0
	[] Common [] Preferred			
	Convertible Securities (including warrants)	_\$0	-	\$0
	Partnership Interests	\$0	_	\$0
	Other (Specify) Units, with each Unit comprises of one common share and one share purchase warrant ("Warrant"), at a price of CDN\$0.40 (US\$0.35 ⁽¹⁾) per Unit. Each warrant entitles the holder to purchase one further common share			
	at a price of CDN\$0.60 (US\$0.53 ⁽¹⁾) per share expiring December 31, 2008.	\$294,000	_	\$294,000
	Total	\$294,000		\$294,000
	Answer also in Appendix, Column 3, if filing under ULOE.		=	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	-	Aggregate Dollar Amount of Purchases
•	Accredited Investors	3	=	\$294,000
	Non-accredited Investors	NIL		\$ NIL
	Total (for filings under Rule 504 only)	N/A	_	\$ N/A
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering	Type of Security		Dollar Amount Sold
	Rule 505	N/A		\$ N/A
	Regulation A	N/A		\$ N/A
	Rule 504	N/A	_	\$ N/A
	Total	N/A	_	\$ N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		r ,	50
	Transfer Agent's Fees		[]	\$0
	Printing and Engraving Costs			\$0
	Legal Fees		[X]	\$ 3,000
	Accounting Fees		[]	\$0
	Engineering Fees		[]	\$0
	Sales Commissions (plus warrants)		[X]	\$23,520
	Other Expenses (identify): State Filing Fees		[X]	\$ 800
	Total		[X]	\$27,320

⁽I) Based on an exchange rate of CDN\$1.00 per US\$0.89 as at July 28, 2006

	C. OFFERING PRICE, NUMBER OF INVESTORS,		ES AN	D USE OF PR	OCEE	DS
4.	b. Enter the difference between the aggregate offering price gresponse to Part C - Question 1 and total expenses furnished in respons					
	C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	•••••				\$266,680
5.	Indicate below the amount of the adjusted gross proceeds to the issuer us proposed to be used for each of the purposes shown. If the amount for an purpose is not known, furnish an estimate and check the box to the left of estimate. The total of the payments listed must equal the adjusted gross provides used force. Solaries and force.	ny of the proceeds	r 1	Payments to Officers, Directors, & Affiliates	,	Payments to Others
	Salaries and fees			\$0	- []	\$0
	Purchase of real estate Purchase, rental or leasing and installation of machinery and equipment		-	\$0 \$0	. []	\$0 \$0
	Construction or leasing of plant buildings and facilities		_	\$0	[]	\$0
	Acquisition of other businesses (including the value of securities in this offering that may be used in exchange for the assets or secu another issuer pursuant to a merger)	involved urities of	-		- ' '	_ \$0
			[]	\$0	[]	\$0
	Repayment of indebtedness		-	\$0	- []	\$0
	Working capital		-	\$0	_ []	\$0
	Other (specify): Advancement of Company's products		[]	\$0	[X]	\$266,680
	Total Payments Listed (column totals added)		[].	\$ [X] \$266,	[X]	\$266,680
50 Co	ne issuer has duly caused this notice to be signed by the undersigned by, the following signature constitutes an undertaking by the emmission, upon written request of its staff, the information furnish tragraph (b)(2) of Rule 502.	issuer to	furnis	sh to the U.S.	. Secur	rities and Exchange
Is	suer (Print or Type)	Signature		Date		
M	TOTAL DATE OF THE	11	v1 //	, ,		
	OUNTAIN POWER INC.	X-U	hd	Augus	t <i>08</i>	, 2006
N		Title of S	igner (Augus Print or Type)	t <u>08</u>	, 2006
	ame of Signer (Print or Type)	Title of S Presider			t <u>08</u>	> , 2006
	ame of Signer (Print or Type) teven Andersen	Presider			t_ <i>O</i> X	> , 2006
	ame of Signer (Print or Type) teven Andersen ATTENTIO	Presider	nt	Print or Type)	t <u>08</u>	> , 2006
	ame of Signer (Print or Type) teven Andersen	Presider	nt	Print or Type)	t <u>08</u>	2006

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions	Yes	No
	of such rule?	[]	[X]

See Appendix, Column 5, for state response

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly signed person.

Issuer (Print or Type)	Signature Date	
MOUNTAIN POWER INC.	Sichel August 08	, 2006
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Steven Andersen	President	

Instruction

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1		2	3	· · · · · · · · · · · · · · · · · · ·	5						
	Intend t non-acc investors (Part B-	o sell to credited s in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and Amount purchases in State (Part C-Item 2)					Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
				Number of Accredited							
State	Yes	No.	Units	Investors	Amount	Investors	Amount	Yes	No		
AL AK											
AZ		X	625,000 Units at a price of US\$0.35 ⁽¹⁾ per Unit for total proceeds of US\$218,750	1	US\$218,750	NIL	N/A		X		
AR											
CA		X	200,000 Units at a price of US\$0.35 ⁽¹⁾ per Unit for total proceeds of US\$70,000	1	US\$70,000	NIL	N/A		X		
CO											
CT DE											
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FL											
GA			23						4.5		
HI											
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NV NH					-				1		
NH NJ		X	15,000 Units at	1	US\$5,250	NIL	N/A		X		
			a price of US\$0.35 ⁽¹⁾ per Unit for total proceeds of US\$5,250	_							
NM NY					+		 				
NC							<u> </u>		 		
ND											

APPENDIX

1		2	3	4					5
}			}					Disqual	ification
			Type of security						ate ULOE
1]	o sell to	and aggregate						, attach
		credited	offering price		Type of invest			explan	ation of
	1	s in State	offered in state		Amount purchase				granted)
	(Part B	Item 1)	(Part C-Item 1)		(Part C-Iter		1	(Part E	-Item 1)
	•			NT 1 C		Number of			
				Number of		Non-	ł	1	
Chata	Yes	No	Timito	Accredited	A	Accredited	A	Yes	No
State	res	No	Units	Investors	Amount	Investors	Amount	ies	NO
				-					 -
OK OR									
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⁽¹⁾ Based on an exchange rate of CDN\$1.00 per US\$0.89 as at July 28, 2006